Effective October 1, 2003																	
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL I	ENTITY	OR	OTHER THAN						
Т	OTAL CLAIMS	<u> </u>	24		ŀ		ŀ	RATE	FEE	٦	RATE	FEE					
F	OR	 i	NUMBER FILED		NUMBER EXTRA			BASIC FE	€ 385.00	OR	BASIC FEE	770.00					
T	OTAL CHARGE	ABLE CLAIMS	2-5 minus 20=		• 4			XS 9=		OR	X\$18=	72					
IN	DEPENDENT C	CLAIMS	1 minus 3 =		· Ø			X43=	┼──	٦	X86=						
м	ULTIPLE DEPE	NDENT CLAIM F	RESENT	IESENT		\Box		A402	┼		×66=						
t If the difference in column 1 is less than Tare							•	+145=	ļ	OR	+290=						
* If the difference in column 1 is less than zero, enter "0" in column 2								TOTAL		OR	TOTAL	242					
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3) SMALL ENTITY OR SMALL EI (Column 3)																	
	CLAIMS		(Colum		EST	(Column 3)		JIMALL	ADDI-	1	SMALL	ADDI-					
AMENDMENT A		REMAINING AFTER AMENDMENT		PREVIO PAID F	USLY	PRESENT EXTRA		RATE	TIONAL		RATE	TIONAL FEE					
	Total	. 24	Minus	- 6)Y	- 🗸		X\$ 9=		OR	X\$18=						
AME	independent		Minus	1-3	}	=	И	X43=		OR	X86=						
_	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+145= .		OR	+290=						
							L	TOTAL	 		TOTAL						
		(Column 1)		(Colum	ın 2)	(Column 3)	,	VDDIT. FEE		10	ADDIT. FEE						
AMENDMENT B		CLAIMS REMAINING		HIGHE		PRESENT	Г		ADDI-	1 (ADDI-					
		AFTER AMENDMENT		PREVIO	USLY	EXTRA		RATE	TIONAL FEE		RATE	TIONAL FEE					
	Total	+	Minus	**				X\$ 9=		OR	X\$18=						
AME	independent	<u> </u>	Minus	***		•		X43=		OR	X86=						
	FIRST PRESENTATION OF MULTIPLE DEPENDENT				CLAIM		▎┟			```							
								+145=		OR	+290=						
		٠					A	TOTAL DOIT. FEE		OR ,	TOTAL ODIT. FEE						
		(Column 1)		(Colum		(Column 3)						ı					
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMBE PREVIOL PAID FO	ER JSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE					
	Total	•	Minus	**		•	r	X\$ 9=		OR	X\$18=						
ığ [Independent	•	Minus	***		-	\vdash										
٩	FIRST PRESENTATION OF MULTIPLE DEPENDENT (LAIM		F	X43=		OR	X86=						
+145= OR +290=																	
	the "Highest Nun the "Highest Nur	nber Previously Pai mber Previously Pa	d For IN THIS d For IN THIS	S SPACE is I S SPACE is I	ess than less than	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20.* ** TOTAL ADDIT. FEE OR ADDIT.											

Application or Docket Number